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FORSYTH CO, NC FEE \$26.00

PRESENTED & RECORDED

04-22-2020 12:28:16 PM

LYNNE JOHNSON

REGISTER OF DEEDS

BY: EVELYN R. DIXON

DPTY

BK: RE 3520

PG: 903-903

Original To: Hazel Mack

ASSUMED BUSINESS NAME CERTIFICATE (NCGS §66-71.5)*Please print legibly.*

1. The assumed business name is:

Other Sun's

(You may include no more than five (5) assumed business names on this form.)

2. The real name of the person or entity engaging in business under the assumed business name is:

HMACS Charter School Consulting LLCSOS 1190786(Corporations, LLC's, limited partnerships must provide the exact name registered with the NC Secretary of State's office and the SOSID number assigned at the time of formation. Go to www.sosnc.gov/br/search to look up your information.)

3. The nature/type of the business is:

Business Center

4. The street address of the principal place of business is: (PO Boxes are not acceptable)

414 Laura Wall Blvd, W-S, NC 27101

5. The mailing address, if different from the street address, is:

6. The counties where the assumed business name will be used to engage in business are:

☒ All 100 North Carolina countiesThis certificate is signed by the owner/legal representative of the person or entity named above, this 22 day of April, 2020.

Signature:

HMACS

Printed/Typed Name:

Hazel Mack

Title:

Owner

(See instructions for who must sign for various business entity types.)